Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, MN 55155-4194

MS4 SWPPP Application for Reauthorization

for the NPDES/SDS General Small Municipal Separate Storm Sewer System (MS4) Permit MNR040000 reissued with an effective date of August 1, 2013

Stormwater Pollution Prevention Program (SWPPP) Document

Doc Type: Permit Application

Instructions: This application is for authorization to discharge stormwater associated with Municipal Separate Storm Sewer Systems (MS4s) under the National Pollutant Discharge Elimination System/State Disposal System (NPDES/SDS) Permit Program. **No fee** is required with the submittal of this application. Please refer to "Example" for detailed instructions found on the Minnesota Pollution Control Agency (MPCA) MS4 website at http://www.pca.state.mn.us/ms4.

Submittal: This *MS4 SWPPP Application for Reauthorization* form must be submitted electronically via e-mail to the MPCA at ms4permitprogram.pca@state.mn.us from the person that is duly authorized to certify this form. All questions with an asterisk (*) are required fields. All applications will be returned if required fields are not completed.

Questions: Contact Claudia Hochstein at 651-757-2881 or claudia.hochstein@state.mn.us, Dan Miller at 651-757-2246 or daniel.miller@state.mn.us, or call toll-free at 800-657-3864.

General Contact Information (*Required fields)

MS4 Owner (with ownership or operational responsibility, or control of the MS4)

*MS4 permittee name: City of Eagan *County: Dakota
(city, county, municipality, government agency or other entity)

*Mailing address: 3830 Pilot Knob Rd

*City: Eagan *State: MN *Zip code: 55122-1810

*Phone (including area code): 651-675-5646 *E-mail: rmatthys@cityofeagan.com

MS4 General contact (with Stormwater Pollution Prevention Program [SWPPP] implementation responsibility)

*Last name: Matthys *First name: Russ
(department head, MS4 coordinator, consultant, etc.)

*Title: Public Works Director

*Mailing address: 3830 Pilot Knob Rd

*City: Eagan *State: MN *Zip code: 55122-1810

*Phone (including area code): 651-675-5646 *E-mail: rmatthys@cityofeagan.com

Preparer information (complete if SWPPP application is prepared by a party other than MS4 General contact)

Last name: Macbeth First name: Eric
(department head, MS4 coordinator, consultant, etc.)

Title: Water Resources Manager

Mailing address: 3501 Coachman Pt

City: Eagan State: MN Zip code: 55122-1452

Phone (including area code): 651-675-5300 E-mail: emacbeth@cityofeagan.com

Verification

1. I seek to continue discharging stormwater associated with a small MS4 after the effective date of this Permit, and shall submit this *MS4 SWPPP Application for Reauthorization* form, in accordance with the schedule in Appendix A, Table 1, with the SWPPP document completed in accordance with the Permit (Part II.D.). ☒ Yes
2. I have read and understand the NPDES/SDS MS4 General Permit and certify that we intend to comply with all requirements of the Permit. ☒ Yes

Certification (All fields are required)

☐ Yes - *I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted.*

I certify that based on my inquiry of the person, or persons, who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I am aware that there are significant penalties for submitting false information, including the possibility of civil and criminal penalties.

This certification is required by Minn. Stat. §§ 7001.0070 and 7001.0540. The authorized person with overall, MS4 legal responsibility must certify the application (principal executive officer or a ranking elected official).

By typing my name in the following box, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing my application.

Name: _____
(This document has been electronically signed)

Title: Public Works Director Date (mm/dd/yyyy): _____

Mailing address: 3830 Pilot Knob Rd

City: Eagan State: MN Zip code: 55122-1810

Phone (including area code): 651-675-5646 E-mail: rmatthys@cityofeagan.com

Note: *The application will not be processed without certification.*

Stormwater Pollution Prevention Program Document

I. Partnerships: (Part II.D.1)

A. List the **regulated small MS4(s)** with which you have established a partnership in order to satisfy one or more requirements of this Permit. Indicate which Minimum Control Measure (MCM) requirements or other program components that each partnership helps to accomplish (List all that apply). Check the box below if you currently have no established partnerships with other regulated MS4s. If you have more than five partnerships, hit the tab key after the last line to generate a new row.

☒ No partnerships with regulated small MS4s

Name and description of partnership	MCM/Other permit requirements involved
N/A	N/A

B. If you have additional information that you would like to communicate about your partnerships with other regulated small MS4(s), provide it in the space below, or include an attachment to the SWPPP Document, with the following file naming convention: *MS4NameHere_Partnerships.*

N/A

II. Description of Regulatory Mechanisms: (Part II.D.2)

Illicit discharges

A. Do you have a regulatory mechanism(s) that effectively prohibits non-stormwater discharges into your small MS4, except those non-stormwater discharges authorized under the Permit (Part III.D.3.b.)? ☐ Yes ☒ No

1. If **yes:**

   a. Check which *type* of regulatory mechanism(s) your organization has (check all that apply):
   - ☐ Ordinance
   - ☐ Contract language
   - ☐ Policy/Standards
   - ☐ Permits
   - ☐ Rules
   - ☐ Other, explain: _____

   b. Provide either a direct link to the mechanism selected above or attach it as an electronic document to this form; or if your regulatory mechanism is either an Ordinance or a Rule, you may provide a citation:

   Citation:

   Direct link:

   ☐ Check here if attaching an electronic copy of your regulatory mechanism, with the following file naming convention: *MS4NameHere_IDDEreg.*

2. If **no:**

   Describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, this permit requirement is met:

   We will revise Eagan City Code Sec. 7.05. Subd. 5. and Subd. 8., which addresses illicit discharge issues, to be at least as stringent within 12 months after permit coverage is extended.

Construction site stormwater runoff control

A. Do you have a regulatory mechanism(s) that establishes requirements for erosion and sediment controls and waste controls? ☒ Yes ☐ No

1. If **yes:**

a. Check which *type* of regulatory mechanism(s) your organization has (check all that apply):

☒ Ordinance ☐ Contract language
☐ Policy/Standards ☒ Permits
☐ Rules
☐ Other, explain: _____

b. Provide either a direct link to the mechanism selected above or attach it as an electronic document to this form; or if your regulatory mechanism is either an Ordinance or a Rule, you may provide a citation:

Citation:

Direct link:

http://www.cityofeagan.com/images/PublicWorks/LakesWetlands/4.32%20Ordinance%20signed.pdf

☐ Check here if attaching an electronic copy of your regulatory mechanism, with the following file naming convention: *MS4NameHere_CSWreg.*

B. Is your regulatory mechanism at least as stringent as the MPCA general permit to Discharge Stormwater Associated with Construction Activity (as of the effective date of the MS4 Permit)? ☐Yes ☒ No

If you answered **yes** to the above question, proceed to C.

If you answered **no** to either of the above permit requirements listed in A. or B., describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

We will revise City Code Sec. 4.32 (Land Disturbance and Erosion Control Regulations) to be at least as stringent within 12 months after permit coverage is extended.

C. Answer **yes** or **no** to indicate whether your regulatory mechanism(s) requires owners and operators of construction activity to develop site plans that incorporate the following erosion and sediment controls and waste controls as described in the Permit (Part III.D.4.a.(1)-(8)), and as listed below:

1.	Best Management Practices (BMPs) to minimize erosion.	☒ Yes	☐ No
2.	BMPs to minimize the discharge of sediment and other pollutants.	☒ Yes	☐ No
3.	BMPs for dewatering activities.	☐ Yes	☒ No
4.	Site inspections and records of rainfall events	☐ Yes	☒ No
5.	BMP maintenance	☐ Yes	☒ No
6.	Management of solid and hazardous wastes on each project site.	☐ Yes	☒ No
7.	Final stabilization upon the completion of construction activity, including the use of perennial vegetative cover on all exposed soils or other equivalent means.	☐ Yes	☒ No
8.	Criteria for the use of temporary sediment basins.	☐ Yes	☒ No

If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

We will revise City Code Sec. 4.32 (Land Disturbance and Erosion Control Regulations) to include specific requirements for items 3-8 above that are at least as stringent within 12 months after permit coverage is extended.

Post-construction stormwater management

A. Do you have a regulatory mechanism(s) to address post-construction stormwater management activities?
☒ Yes ☐ No

1. If **yes:**

a. Check which *type* of regulatory mechanism(s) your organization has (check all that apply):

☒ Ordinance ☐ Contract language
☐ Policy/Standards ☒ Permits
☐ Rules
☐ Other, explain: _____

b. Provide either a direct link to the mechanism selected above or attach it as an electronic document to this form; or if your regulatory mechanism is either an Ordinance or a Rule, you may provide a citation:

Citation:

Direct link:

http://www.cityofeagan.com/images/PublicWorks/LakesWetlands/4.33%20Ordinance%20signed.pdf

☐ Check here if attaching an electronic copy of your regulatory mechanism, with the following file naming convention: *MS4NameHere_PostCSWreg.*

B. Answer **yes** or **no** below to indicate whether you have a regulatory mechanism(s) in place that meets the following requirements as described in the Permit (Part III.D.5.a.):

1. **Site plan review:** Requirements that owners and/or operators of construction activity submit site plans with post-construction stormwater management BMPs to the permittee for review and approval, prior to start of construction activity. ☒ Yes ☐ No

2. **Conditions for post construction stormwater management:** Requires the use of any combination of BMPs, with highest preference given to Green Infrastructure techniques and practices (e.g., infiltration, evapotranspiration, reuse/harvesting, conservation design, urban forestry, green roofs, etc.), necessary to meet the following conditions on the site of a construction activity to the Maximum Extent Practicable (MEP):

   a. For new development projects – no net increase from pre-project conditions (on an annual average basis) of: ☐ Yes ☒ No

      1) Stormwater discharge volume, unless precluded by the stormwater management limitations in the Permit (Part III.D.5.a(3)(a)).
      2) Stormwater discharges of Total Suspended Solids (TSS).
      3) Stormwater discharges of Total Phosphorus (TP).

   b. For redevelopment projects – a net reduction from pre-project conditions (on an annual average basis) of: ☐ Yes ☒ No

      1) Stormwater discharge volume, unless precluded by the stormwater management limitations in the Permit (Part III.D.5.a(3)(a)).
      2) Stormwater discharges of TSS.
      3) Stormwater discharges of TP.

3. **Stormwater management limitations and exceptions:**

   a. Limitations

      1) Prohibit the use of infiltration techniques to achieve the conditions for post-construction stormwater management in the Permit (Part III.D.5.a(2)) when the infiltration structural stormwater BMP will receive discharges from, or be constructed in areas: ☐ Yes ☒ No
         a) Where industrial facilities are not authorized to infiltrate industrial stormwater under an NPDES/SDS Industrial Stormwater Permit issued by the MPCA.
         b) Where vehicle fueling and maintenance occur.
         c) With less than three (3) feet of separation distance from the bottom of the infiltration system to the elevation of the seasonally saturated soils or the top of bedrock.
         d) Where high levels of contaminants in soil or groundwater will be mobilized by the infiltrating stormwater.

      2) Restrict the use of infiltration techniques to achieve the conditions for post-construction stormwater management in the Permit (Part III.D.5.a(2)), without higher engineering review, sufficient to provide a functioning treatment system and prevent adverse impacts to groundwater, when the infiltration device will be constructed in areas: ☐ Yes ☒ No
         a) With predominately Hydrologic Soil Group D (clay) soils.
         b) Within 1,000 feet up-gradient, or 100 feet down-gradient of active karst features.
         c) Within a Drinking Water Supply Management Area (DWSMA) as defined in Minn. R. 4720.5100, subp. 13.
         d) Where soil infiltration rates are more than 8.3 inches per hour.

      3) For linear projects where the lack of right-of-way precludes the installation of volume control practices that meet the conditions for post-construction stormwater management in the Permit (Part III.D.5.a(2)), the permittee's regulatory mechanism(s) may allow exceptions as described in the Permit (Part III.D.5.a(3)(b)). The permittee's regulatory mechanism(s) shall ensure that a reasonable attempt be made to obtain right-of-way during the project planning process. ☐ Yes ☒ No

4. **Mitigation provisions:** The permittee's regulatory mechanism(s) shall ensure that any stormwater discharges of TSS and/or TP not addressed on the site of the original construction activity are addressed through mitigation and, at a minimum, shall ensure the following requirements are met:

a. Mitigation project areas are selected in the following order of preference: ☐ Yes ☒ No
   1) Locations that yield benefits to the same receiving water that receives runoff from the original construction activity.
   2) Locations within the same Minnesota Department of Natural Resource (DNR) catchment area as the original construction activity.
   3) Locations in the next adjacent DNR catchment area up-stream
   4) Locations anywhere within the permittee's jurisdiction.

b. Mitigation projects must involve the creation of new structural stormwater BMPs or the retrofit of existing structural stormwater BMPs, or the use of a properly designed regional structural stormwater BMP. ☐ Yes ☒ No

c. Routine maintenance of structural stormwater BMPs already required by this permit cannot be used to meet mitigation requirements of this part. ☐ Yes ☒ No

d. Mitigation projects shall be completed within 24 months after the start of the original construction activity. ☐ Yes ☒ No

e. The permittee shall determine, and document, who will be responsible for long-term maintenance on all mitigation projects of this part. ☐ Yes ☒ No

f. If the permittee receives payment from the owner and/or operator of a construction activity for mitigation purposes in lieu of the owner or operator of that construction activity meeting the conditions for post-construction stormwater management in Part III.D.5.a(2), the permittee shall apply any such payment received to a public stormwater project, and all projects must be in compliance with Part III.D.5.a(4)(a)-(e). ☐ Yes ☒ No

5. **Long-term maintenance of structural stormwater BMPs:** The permittee's regulatory mechanism(s) shall provide for the establishment of legal mechanisms between the permittee and owners or operators responsible for the long-term maintenance of structural stormwater BMPs not owned or operated by the permittee, that have been implemented to meet the conditions for post-construction stormwater management in the Permit (Part III.D.5.a(2)). This only includes structural stormwater BMPs constructed after the effective date of this permit and that are directly connected to the permittee's MS4, and that are in the permittee's jurisdiction. The legal mechanism shall include provisions that, at a minimum:

   a. Allow the permittee to conduct inspections of structural stormwater BMPs not owned or operated by the permittee, perform necessary maintenance, and assess costs for those structural stormwater BMPs when the permittee determines that the owner and/or operator of that structural stormwater BMP has not conducted maintenance. ☒ Yes ☐ No

   b. Include conditions that are designed to preserve the permittee's right to ensure maintenance responsibility, for structural stormwater BMPs not owned or operated by the permittee, when those responsibilities are legally transferred to another party. ☒ Yes ☐ No

   c. Include conditions that are designed to protect/preserve structural stormwater BMPs and site features that are implemented to comply with the Permit (Part III.D.5.a(2)). If site configurations or structural stormwater BMPs change, causing decreased structural stormwater BMP effectiveness, new or improved structural stormwater BMPs must be implemented to ensure the conditions for post-construction stormwater management in the Permit (Part III.D.5.a(2)) continue to be met. ☐ Yes ☒ No

If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within twelve (12) months of the date permit coverage is extended, these permit requirements are met:
We will revise City Code Sec. 4.33 (Post Construction Requirements) to include specific requirements for items 2-5 above that are at least as stringent within 12 months after permit coverage is extended.

III. Enforcement Response Procedures (ERPs): (Part II.D.3)

A. Do you have existing ERPs that satisfy the requirements of the Permit (Part III.B.)? ☐ Yes ☒ No

1. If **yes**, attach them to this form as an electronic document, with the following file naming convention: *MS4NameHere_ERPs.*
2. If **no**, describe the tasks and corresponding schedules that will be taken to assure that, with twelve (12) months of the date permit coverage is extended, these permit requirements are met:

   We will document and publish written ERPs that are at least as stringent within 12 months after permit coverage is extended.

B. Describe your ERPs:

City Code Sec. 4.32 (Land Disturbance and Erosion Control Regulations) provides a procedure for issuing by certified U.S. mail written notification of violation(s) to construction site operators who are not complying with approved land distrubance and erosion control plan(s) and for enforcing corrective action(s). These City regulations also provide for

emergeny corrective actions by the City, as necessary and appropriate.

IV. Storm Sewer System Map and Inventory: (Part II.D.4.)

A. Describe how you manage your storm sewer system map and inventory:

Our storm sewer system map and inventory are in our comprehensive city GIS database that we update as needed from as-built plans and error discoveries.

B. Answer **yes** or **no** to indicate whether your storm sewer system map addresses the following requirements from the Permit (Part III.C.1.a-d), as listed below:

1. The permittee's entire small MS4 as a goal, but at a minimum, all pipes 12 inches or greater in diameter, including stormwater flow direction in those pipes. ☒ Yes ☐ No
2. Outfalls, including a unique identification (ID) number assigned by the permittee, and an associated geographic coordinate. ☒ Yes ☐ No
3. Structural stormwater BMPs that are part of the permittee's small MS4. ☒ Yes ☐ No
4. All receiving waters. ☒ Yes ☐ No

If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

C. Answer **yes** or **no** to indicate whether you have completed the requirements of 2009 Minnesota Session Law, Ch. 172. Sec. 28: with the following inventories, according to the specifications of the Permit (Part III.C.2.a.-b.), including:

1. All ponds within the permittee's jurisdiction that are constructed and operated for purposes of water quality treatment, stormwater detention, and flood control, and that are used for the collection of stormwater via constructed conveyances. ☒ Yes ☐ No
2. All wetlands and lakes, within the permittee's jurisdiction, that collect stormwater via constructed conveyances. ☒ Yes ☐ No

D. Answer **yes** or **no** to indicate whether you have completed the following information for each feature inventoried.

1. A unique identification (ID) number assigned by the permittee. ☒ Yes ☐ No
2. A geographic coordinate. ☒ Yes ☐ No
3. Type of feature (e.g., pond, wetland, or lake). This may be determined by using best professional judgment. ☒ Yes ☐ No

If you have answered **yes** to all above requirements, and you have already submitted the Pond Inventory Form to the MPCA, then you do not need to resubmit the inventory form below.

If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

E. Answer **yes** or **no** to indicate if you are attaching your pond, wetland and lake inventory to the MPCA on the form provided on the MPCA website at: http://www.pca.state.mn.us/ms4 , according to the specifications of Permit (Part III.C.2.b.(1)-(3)). Attach with the following file naming convention: *MS4NameHere_inventory*. ☐ Yes ☒ No

If you answered **no,** the inventory form must be submitted to the MPCA MS4 Permit Program within 12 months of the date permit coverage is extended.

V. Minimum Control Measures (MCMs) (Part II.D.5)

A. MCM1: Public education and outreach

1. The Permit requires that, within 12 months of the date permit coverage is extended, existing permittees revise their education and outreach program that focuses on illicit discharge recognition and reporting, as well as other specifically selected stormwater-related issue(s) of high priority to the permittee during this permit term. Describe your **current** educational program, including **any high-priority topics included**:

Eagan's public education program has three primary objectives: 1) recognition of the connection between the storm sewer

system and city lakes and wetlands; 2) importance of keeping debris, vegetative materials, fertilizers, and chemical wastes away from streets and driveways; and 3) awareness of restrictions on lawn fertilizers containing phosphorus. Related outreach efforts attempt to facilitate residents: 1) acknowledging responsility about individual and collective roles in generating and reducing stormwater pollution and 2) facilitating actions to reduce impacts of stormwater runoff.

2. List the categories of BMPs that address your public education and outreach program, including the distribution of educational materials and a program implementation plan. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. Refer to the U.S. Environmental Protection Agency's (EPA) *Measurable Goals Guidance for Phase II Small MS4s* (http://www.epa.gov/npdes/pubs/measurablegoals.pdf).

   If you have more than five categories, hit the tab key after the last line to generate a new row.

Established BMP categories	**Measurable goals and timeframes**
Brochures	Number and distribution of brochures
Newsletter articles	Number of published articles in bi-monthly newsletter
Web site	Number of hits on "Stop Stormwater Pollution" web page (http://www.cityofeagan.com/index.php/public-works-department/water-resources/stop-stormwater-pollution)
School presentations	Number of school presentations and students
Events (e.g., Home & Leisure shows, Blue Thumb, LakeFest, MarketFest, etc.)	Number of events and attendees

BMP categories to be implemented	**Measurable goals and timeframes**
N/A	N/A

3. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

   Eric Macbeth

B. MCM2: Public participation and involvement

1. The Permit (Part III.D.2.a.) requires that, within 12 months of the date permit coverage is extended, existing permittees shall revise their current program, as necessary, and continue to implement a public participation/involvement program to solicit public input on the SWPPP. Describe your current program:

   We hold an annual meeting about Eagan's SWPPP to allow residents to learn about our wide-ranging efforts to keep pollutants out of lakes and wetlands and to ask questions or provide input to City staff. SWPPP annual meetings are livecast on local cable TV or recorded for future cable programming. A link to recorded videos of annual meetings is provided on the "Stop Stormwater Pollution" web page. If opportunity presents, we may combine an annual meeting with another public meeting about lake studies or plans.

2. List the categories of BMPs that address your public participation/involvement program, including solicitation and documentation of public input on the SWPPP. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. Refer to the EPA's *Measurable Goals Guidance for Phase II Small MS4s* (http://www.epa.gov/npdes/pubs/measurablegoals.pdf). **If you have more than five categories**, hit the tab key after the last line to generate a new row.

Established BMP categories	**Measurable goals and timeframes**
Annual SWPPP public participation/involvement	At least one (1) annual opportunity provided for public input; Publicly noticed at least 30 days prior (for a meeting); Recorded contacts and comments
Web site	Link to recorded video (for a meeting) posted on "Stop Stormwater Pollution" web page (http://www.cityofeagan.com/index.php/public-works-department/water-resources/stop-stormwater-pollution) for at least two weeks after
Citizen Support Center	Year-round online access provided for questions, requests, or answers and be forwarded to appropriate staff for follow-up (http://cityofeagan.com/index.php/2012-11-28-20-13-01)

BMP categories to be implemented	Measurable goals and timeframes
Online SWPPP document	Link to SWPPP document posted on "Stop Stormwater Pollution" web page (http://www.cityofeagan.com/index.php/public-works-department/water-resources/stop-stormwater-pollution) within one month after coverage is extended

3. Do you have a process for receiving and documenting citizen input? ☒ Yes ☐ No

   If you answered **no** to the above permit requirement, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, this permit requirement is met:

4. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

   Eric Macbeth

C. MCM 3: Illicit discharge detection and elimination

1. The Permit (Part III.D.3.) requires that, within 12 months of the date permit coverage is extended, existing permittees revise their current program as necessary, and continue to implement and enforce a program to detect and eliminate illicit discharges into the small MS4. Describe your current program:

   Eagan City Code Sec. 7.05. Subd. 5. addresses illicit discharge issues relating to dumping in streets, sidewalk or trail, storm sewers, or catch basins and City Code Sec. 7.05. Subd. 8 targets tracking dirts, clay, or soild onto streets and responsibility of vehicle operators to restrict potential pollutants from stormwater runoff. City Code 4.04 regulates individual sewage treatment systems, including post-construction inspections. We regularly respond to questions or reports about potential illicit discharges. We will revise City Code to be at least as stringent within 12 months after permit coverage is extended.

2. Does your Illicit Discharge Detection and Elimination Program meet the following requirements, as found in the Permit (Part III.D.3.c.-g.)?

   a. Incorporation of illicit discharge detection into all inspection and maintenance activities conducted under the Permit (Part III.D.6.e.-f.)Where feasible, illicit discharge inspections shall be conducted during dry-weather conditions (e.g., periods of 72 or more hours of no precipitation). ☐ Yes ☒ No

   b. Detecting and tracking the source of illicit discharges using visual inspections. The permittee may also include use of mobile cameras, collecting and analyzing water samples, and/or other detailed procedures that may be effective investigative tools. ☒ Yes ☐ No

   c. Training of all field staff, in accordance with the requirements of the Permit (Part III.D.6.g.(2)), in illicit discharge recognition (including conditions which could cause illicit discharges), and reporting illicit discharges for further investigation. ☐ Yes ☒ No

   d. Identification of priority areas likely to have illicit discharges, including at a minimum, evaluating land use associated with business/industrial activities, areas where illicit discharges have been identified in the past, and areas with storage of large quantities of significant materials that could result in an illicit discharge. ☐ Yes ☒ No

   e. Procedures for the timely response to known, suspected, and reported illicit discharges. ☐ Yes ☒ No

   f. Procedures for investigating, locating, and eliminating the source of illicit discharges. ☐ Yes ☒ No

   g. Procedures for responding to spills, including emergency response procedures to prevent spills from entering the small MS4. The procedures shall also include the immediate notification of the Minnesota Department of Public Safety Duty Officer, if the source of the illicit discharge is a spill or leak as defined in Minn. Stat. § 115.061. ☒ Yes ☐ No

   h. When the source of the illicit discharge is found, the permittee shall use the ERPs required by the Permit (Part III.B.) to eliminate the illicit discharge and require any needed corrective action(s). ☐ Yes ☒ No

   If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

   We will revise our IDDE program to include specific activities, training, and procedures for items a-h above that are at least as stringent within 12 months after permit coverage is extended.

3. List the categories of BMPs that address your illicit discharge, detection and elimination program. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. Refer to the EPA's *Measurable Goals Guidance for Phase II Small MS4s*

(http://www.epa.gov/npdes/pubs/measurablegoals.pdf).

If you have more than five categories, hit the tab key after the last line to generate a new row.

Established BMP categories	Measurable goals and timeframes
Storm sewer system map	Updated GIS database of entire MS4 as needed
City Code 7.05, 4.04	At least as stringent as MS4 General Permit
IDDE inspections	Number and location of IDDE inspections

BMP categories to be implemented	Measurable goals and timeframes
Pond, wetland, and lake inventory	Submit MPCA form within 12 months after permit coverage is extended.
City Code revisions	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.
IDDE inspection incorporation	Detection of illicit discharges incorporated into all inspection and maintenance activities and during dry-weather conditions where feasible, within 12 months after permit coverage is extended.
Staff training	All field staff trained in recognition and reporting of illicit discharges within 12 months after permit coverage is extended.
Identification of priority areas	Priority areas identified per land-use type, potential, and history within 12 months after permit coverage is extended.
Written ERPs and procedures	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.

4. Do you have procedures for record-keeping within your Illicit Discharge Detection and Elimination (IDDE) program as specified within the Permit (Part III.D.3.h.)? ☐ Yes ☒ No

   If you answered **no**, indicate how you will develop procedures for record-keeping of your Illicit Discharge, Detection and Elimination Program, within 12 months of the date permit coverage is extended:

   We will revise our IDDE program to include procedures for record-keeping that are at least as stringent within 12 months after permit coverage is extended.

5. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

   John Gorder

D. MCM 4: Construction site stormwater runoff control

1. The Permit (Part III.D.4) requires that, within 12 months of the date permit coverage is extended, existing permittees shall revise their current program, as necessary, and continue to implement and enforce a construction site stormwater runoff control program. Describe your current program:

   Eagan City Code Sec. 4.32 (Land Disturbance and Erosion Control Regulations; LDEC) addresses construction site stormwater runoff control issues relating to any activity that disturbs at least 10,000 square feet of property.The City's program provides for preparation and review of LDEC plans and for field inspection of erosion control measures by trained staff. We will revise City Code to be at least as stringent within 12 months after permit coverage is extended.

2. Does your program address the following BMPs for construction stormwater erosion and sediment control as required in the Permit (Part III.D.4.b.):
   a. Have you established written procedures for site plan reviews that you conduct prior to the start of construction activity? ☒ Yes ☐ No
   b. Does the site plan review procedure include notification to owners and operators proposing construction activity that they need to apply for and obtain coverage under the MPCA's general permit to *Discharge Stormwater Associated with Construction Activity No. MN R100001*? ☒ Yes ☐ No
   c. Does your program include written procedures for receipt and consideration of reports of noncompliance or other stormwater related information on construction activity submitted by the public to the permittee? ☐ Yes ☒ No
   d. Have you included written procedures for the following aspects of site inspections to determine compliance with your regulatory mechanism(s):
      1) Does your program include procedures for identifying priority sites for inspection? ☐ Yes ☒ No
      2) Does your program identify a frequency at which you will conduct construction site inspections? ☐ Yes ☒ No
      3) Does your program identify the names of individual(s) or position titles of those responsible for conducting construction site inspections? ☐ Yes ☒ No

4) Does your program include a checklist or other written means to document construction site inspections when determining compliance? ☒ Yes ☐ No

e. Does your program document and retain construction project name, location, total acreage to be disturbed, and owner/operator information? ☒ Yes ☐ No

f. Does your program document stormwater-related comments and/or supporting information used to determine project approval or denial? ☒ Yes ☐ No

g. Does your program retain construction site inspection checklists or other written materials used to document site inspections? ☒ Yes ☐ No

If you answered **no** to any of the above permit requirements, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met.

We will revise our construction site stormwater runoff control program to include specific requirements for items c-d above that are at least as stringent within 12 months after permit coverage is extended.

3. List the categories of BMPs that address your construction site stormwater runoff control program. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. Refer to the EPA's *Measurable Goals Guidance for Phase II Small MS4s* (http://www.epa.gov/npdes/pubs/measurablegoals.pdf). **If you have more than five categories**, hit the tab key after the last line to generate a new row.

Established BMP categories	**Measurable goals and timeframes**
City Code 4.32	At least as stringent as MS4 General Permit
Correction notices	Number of issued notices
Citywide SWPPP Team	Number of SWPPP Team staff
Trained inspection staff	Number of trained inspection staff

BMP categories to be implemented	**Measurable goals and timeframes**
City Code 4.32 revisions	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.
Written ERPs and procedures	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.

4. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

   John Gorder

E. MCM 5: Post-construction stormwater management

1. The Permit (Part III.D.5.) requires that, within 12 months of the date permit coverage is extended, existing permittees shall revise their current program, as necessary, and continue to implement and enforce a post-construction stormwater management program. Describe your current program:

   Eagan City Code Sec. 4.33 (Post Construction Requirements) addresses post-construction site stormwater runoff control issues.The City's program provides for preparation and review of the LDEC plans and for field inspection of erosion control measures by trained staff. We will revise City Code to be at least as stringent within 12 months after permit coverage is extended.

2. Have you established written procedures for site plan reviews that you will conduct prior to the start of construction activity? ☒ Yes ☐ No

3. Answer **yes** or **no** to indicate whether you have the following listed procedures for documentation of post-construction stormwater management according to the specifications of Permit (Part III.D.5.c.):

   a. Any supporting documentation that you use to determine compliance with the Permit (Part III.D.5.a), including the project name, location, owner and operator of the construction activity, any checklists used for conducting site plan reviews, and any calculations used to determine compliance? ☒ Yes ☐ No

   b. All supporting documentation associated with mitigation projects that you authorize? ☐ Yes ☒ No

   c. Payments received and used in accordance with Permit (Part III.D.5.a.(4)(f))? ☒ Yes ☐ No

   d. All legal mechanisms drafted in accordance with the Permit (Part III.D.5.a.(5)), including date(s) of the agreement(s) and names of all responsible parties involved? ☒ Yes ☐ No

   If you answered **no** to any of the above permit requirements, describe the steps that will be taken to assure that, within

12 months of the date permit coverage is extended, these permit requirements are met.

We will revise our post-construction stormwater management program to develop specific procedures for documenting mitigation projects that we authorize that are at least as stringent within 12 months after permit coverage is extended.

4. List the categories of BMPs that address your post-construction stormwater management program. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. Refer to the EPA's *Measurable Goals Guidance for Phase II Small MS4s* (http://www.epa.gov/npdes/pubs/measurablegoals.pdf). **If you have more than five categories**, hit the tab key after the last line to generate a new row.

Established BMP categories	Measurable goals and timeframes
Code Section 4.33	At least as stringent as MS4 General Permit
BMP design standards	Updated as needed and implemented as appropriate
Infiltration/bioretention/filtration BMPs	Updated GIS database of BMPs as needed
Long-term operation/maintenance of BMPs	Updated records of maintenance agreements and activities

BMP categories to be implemented	Measurable goals and timeframes
City Code 4.33 revisions	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.
Written ERPs and procedures	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.

5. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

   John Gorder

F. MCM 6: Pollution prevention/good housekeeping for municipal operations

1. The Permit (Part III.D.6.) requires that, within 12 months of the date permit coverage is extended, existing permittees shall revise their current program, as necessary, and continue to implement an operations and maintenance program that prevents or reduces the discharge of pollutants from the permittee owned/operated facilities and operations to the small MS4. Describe your current program:

   The City conducts many departmental programs, directed by supervisory staff, as part of its overall municipal operations and maintenance program, including: Fleet and Building Maintenance Training, New Construction and Land Disturbance Training, Park and Open Space MaintenanceTraining, Public Street Sweeping, Spill Response Plan Training, Stormwater System Maintenance Training,Vehicle Maintenance, and Vehicle Washing. Training of permanent and temporary employees establishes appropriate maintenance efforts on public property and provides the first line of defense for our MS4 SWPPP at construction sites. Training of temporary employees, oftne local citizens, enhances public education of the community.

2. Do you have a facilities inventory as outlined in the Permit (Part III.D.6.a.)? ☒ Yes ☐ No

3. If you answered **no** to the above permit requirement in question 2, describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, this permit requirement is met:

4. List the categories of BMPs that address your pollution prevention/good housekeeping for municipal operations program. Use the first table for categories of BMPs that you have established and the second table for categories of BMPs that you plan to implement over the course of the permit term.

   Include the measurable goals with appropriate timeframes that each BMP category will be implemented and completed. In addition, provide interim milestones and the frequency of action in which the permittee will implement and/or maintain the BMPs. For an explanation of measurable goals, refer to the EPA's *Measurable Goals Guidance for Phase II Small MS4s* (http://www.epa.gov/npdes/pubs/measurablegoals.pdf).

   If you have more than five categories, hit the tab key after the last line to generate a new row.

Established BMP categories	Measurable goals and timeframes
Staff training	Number of trained staff

Public street sweeping	Updated program as needed; number of annual sweepings and miles
Inspection of outfalls, sediment basins, and stormwater ponds	Conduct inspections of all outfalls, sediment basins, and stormwater ponds in compliance with MS4 General Permit.
Inspection of structural stormwater BMPs	Conduct inspections of all MS4 structural devices in compliance with MS4 General Permit.
Inspection of exposed stockpiles and storage and material handling areas	Conduct inspections of all exposed stockpiles and storage and material handling areas in compliance with MS4 General Permit.
Recordkeeping of inspections; corrective work for necessary maintenance, repair, or replacement	Updated CityWorks asset-management/work-order software
Spill response plan	Updated program as needed
Lake water quality monitoring and assessment	Updated as needed and implemented program
Restricted and special waters protection	Ensured prohibition of new stormwater discharges to Nicols Meadow Area Fen, Gun Club Lake South Fen, Harnack Creek, and Kennealy Creek.
Comprehensive local water management plan	Updated as needed and implemented plan
Impaired waters review process	Review 303(d) list as needed; implemented plans as appropriate
Fish Lake alum treatment system	Operated and maintained at least as stringent as MS4 General Permit within three months after permit coverage is extended.
BMP categories to be implemented	**Measurable goals and timeframes**
Staff training revisions	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.
Inspection procedures	At least as stringent as MS4 General Permit within 12 months after permit coverage is extended.
Pond assessment procedures	Developed procedures and schedule for determining TSS and TP treatment effectiveness of all our owned/operated ponds constructed and used for collection and treatment of stormwater within 12 months after permit coverage is extended.

5. Does discharge from your MS4 affect a Source Water Protection Area (Permit Part III.D.6.c.)? ☐ Yes ☒ No

   a. If **no**, continue to 6.

   b. If **yes**, the Minnesota Department of Health (MDH) is in the process of mapping the following items. Maps are available at http://www.health.state.mn.us/divs/eh/water/swp/maps/index.htm. Is a map including the following items available for your MS4:

      1) Wells and source waters for drinking water supply management areas identified as vulnerable under Minn. R. 4720.5205, 4720.5210, and 4720.5330? ☐ Yes ☐ No

      2) Source water protection areas for surface intakes identified in the source water assessments conducted by or for the Minnesota Department of Health under the federal Safe Drinking Water Act, U.S.C. §§ 300j – 13? ☐ Yes ☐ No

   c. Have you developed and implemented BMPs to protect any of the above drinking water sources? ☐ Yes ☐ No

6. Have you developed procedures and a schedule for the purpose of determining the TSS and TP treatment effectiveness of all permittee owned/operated ponds constructed and used for the collection and treatment of stormwater, according to the Permit (Part III.D.6.d.)? ☐ Yes ☒ No

7. Do you have inspection procedures that meet the requirements of the Permit (Part III.D.6.e.(1)-(3)) for structural stormwater BMPs, ponds and outfalls, and stockpile, storage and material handling areas? ☐ Yes ☒ No

8. Have you developed and implemented a stormwater management training program commensurate with each employee's job duties that:

   a. Addresses the importance of protecting water quality? ☐ Yes ☒ No

   b. Covers the requirements of the permit relevant to the duties of the employee? ☐ Yes ☒ No

c. Includes a schedule that establishes initial training for new and/or seasonal employees and recurring training intervals for existing employees to address changes in procedures, practices, techniques, or requirements? ☐ Yes ☒ No

9. Do you keep documentation of inspections, maintenance, and training as required by the Permit (Part III.D.6.h.(1)-(5))? ☐ Yes ☒ No

If you answered **no** to any of the above permit requirements listed in **Questions 5 – 9**, then describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met:

We will revise our pollution prevention/good housekeeping program to include specific requirements for questions 6-9 above that are at least as stringent within 12 months after permit coverage is extended.

10. Provide the name or the position title of the individual(s) who is responsible for implementing and/or coordinating this MCM:

Russ Matthys

VI. Compliance Schedule for an Approved Total Maximum Daily Load (TMDL) with an Applicable Waste Load Allocation (WLA) (Part II.D.6.)

A. Do you have an approved TMDL with a Waste Load Allocation (WLA) prior to the effective date of the Permit? ☒ Yes ☐ No

1. If **no**, continue to section VII.
2. If **yes**, fill out and attach the MS4 Permit TMDL Attachment Spreadsheet with the following naming convention**:** *MS4NameHere_TMDL.*

   This form is found on the MPCA MS4 website: http://www.pca.state.mn.us/ms4.

VII. Alum or Ferric Chloride Phosphorus Treatment Systems (Part II.D.7.)

A. Do you own and/or operate any Alum or Ferric Chloride Phosphorus Treatment Systems which are regulated by this Permit (Part III.F.)? ☒ Yes ☐ No

1. If **no**, this section requires no further information.
2. If **yes**, you own and/or operate an Alum or Ferric Chloride Phosphorus Treatment System within your small MS4, then you must submit the Alum or Ferric Chloride Phosphorus Treatment Systems Form supplement to this document, with the following naming convention: *MS4NameHere_TreatmentSystem*.
   This form is found on the MPCA MS4 website: http://www.pca.state.mn.us/ms4.

VIII. Add any Additional Comments to Describe Your Program

TMDL Wasteload Allocation Excel Spreadsheet PART II.D.6.a.-e.

Copy and paste from the Master List MS4 TMDL Spreadsheet for your MS4 to the space below.

*Attach this completed form with your SWPPP Document at the time of submittal. At a **minimum,** provide all of the information "*" items (TMDL Project Name, Type of WLA, Numeric WLA, Unit, Flow*

Permittee name	Preferred ID	TMDL project name*	Waterbody ID	Type of WLA*	Numeric WLA*	Unit*	Percent reduction	Flow condition*	Waterbody name	Pollutant of concern*	Date approved
Eagan City	MS400014	Fish Lake Nutrient TMDL	19-0057-00	Individual	0.72	lbs/day		N/A	Fish Lake	Phosphorus	9/9/2010
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-507	Categorical	5.99	10^12 organisms/month		High	Vermillion River; Below trout stream portion to South Br. Vermillion River	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-507	Categorical	1.57	10^12 organisms/month		Moist	Vermillion River; Below trout stream portion to South Br. Vermillion River	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-507	Categorical	0.36	10^12 organisms/month		Mid-Range	Vermillion River; Below trout stream portion to South Br. Vermillion River	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-507	Categorical	**	10^12 organisms/month		Dry	Vermillion River; Below trout stream portion to South Br. Vermillion River	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-507	Categorical	**	10^12 organisms/month		Low	Vermillion River; Below trout stream portion to South Br. Vermillion River	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-506	Categorical	8.62	10^12 organisms/month		High	Vermillion River; South Br. Vermillion River to the Hastings Dam	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-506	Categorical	3.09	10^12 organisms/month		Moist	Vermillion River; South Br. Vermillion River to the Hastings Dam	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-506	Categorical	1.57	10^12 organisms/month		Mid-Range	Vermillion River; South Br. Vermillion River to the Hastings Dam	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-506	Categorical	0.30	10^12 organisms/month		Dry	Vermillion River; South Br. Vermillion River to the Hastings Dam	Fecal Coliform	4/5/2006
Eagan City	MS400014	Lower Mississippi River Basin Fecal Coliform Bacteria TMDL	07040001-506	Categorical	**	10^12 organisms/month		Low	Vermillion River; South Br. Vermillion River to the Hastings Dam	Fecal Coliform	4/5/2006

Compliance Schedule PART II.D.6.f.-g.

Is your MS4 currently meeting its WLA for any approved TMDLs? **Go to:** **Go to:** **Go to:**

☑ **NO** (Complete Table 1, Strategies for continued BMP implementation beyond the term of this permit, and Table 2 below) Table 1 Strategies... Table 2

☑ **YES** (Provide the following information below)

If YES, indicate the WLAs (may be grouped by TMDL Project) you believe are reasonably being met. For each WLA, list the implemented BMPs and provide a narrative strategy for the long-term continuation of meeting each WLA. PART II.D.6.g.(1)-(2)

Lower Mississippi River Basin Fecal Coliform Bacteria TMDL: 5.99, 1.57, 0.36, 8.62, 3.09, 1.57, and 0.30 10^12 E. coli

Only two very small areas of residential backyards (<6 ac. total) within the City of Eagan are within the Lower Mississippi River watershed. However, these backyard areas are not connected to any MS4 infrastructure. Thus, it is reasonable to assume the WLAs have already being met.

Table 1

Fill in the following table with your Interim Milestones, BMP IDs, and Implementation Dates. Replace "TMDL Project Name & Pollutant" Columns with each TMDL Project Name and the corresponding pollutant. Then put an "X" in the boxes for the TMDL that corresponds with each BMP. PART II.D.6.f.(1)-(2)

NOTE:

It is recommended to assign each Interim Milestone (BMP) a BMP ID. You will be required to report on the status of each Interim Milestone and include a BMP ID for all structural BMPs as part of the MS4 Annual Report (see Part III.E.), so including those ID numbers at the time of application may be useful in tracking implementation efforts. If a pond that will be included in the pond inventory (Part III.C.2.) is to be applied toward a WLA, use the same ID for both the pond inventory and TMDL tracking. Non-structural BMPs are not required to have an ID, but it may be useful to assign it an ID for internal MS4 recordkeeping.

MPCA recommends the Implementation Dates align with the submittal of MS4 Annual Reports. Dates selected may not reflect the actual date a BMP is implemented, but shall indicate a BMP will be implemented on that date or before for that reporting year.

Interim Milestone (Best Management Practice)	BMP ID	Implementation Date	Fish Lake Nutrient TMDL; Phosphorus
Annually Operate Stormwater Inflow Alum Treatment System		8/25/2011	X
Annually Sweep Streets in Lake Direct Drainage Area		4/1/2011	X
Annually Conduct Comprehensive Public Education Programs		1/1/2011	X
Annually Harvest Lake Plants		8/5/2011	X
Increase Volume of City Pond JP-3.1 (one-time)		6/3/2011	X
Apply Alum to Inactive Lake Sediment Phosphorus (one-time)		5/20/2011	X

Strategies for continued BMP implementation beyond the term of this permit. PART II.D.6.f.(3)

The City intends to continue annual implementiation of BMPs and to employ Adaptive Management to evaluate progress and adjust strategies as needed. All city construction projects will consider Green Infrastructure practices when feasible. Upon reevaluation of the TMDL waters on a ten-year monitoring cycle conducted by the state, the City will consider any necessary modifications to this approach.

Table 2

Target dates the applicable WLA(s) will be achieved. PART II.D.6.f.(4)

TMDL Project	Target Date to Achieve WLA
Fish Lake Nutrient TMDL	2015

Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, MN 55155-4194

Permit Change Request Form

NPDES/SDS Permit Program

Doc Type: Permit Application

The National Pollutant Discharge Elimination System (NPDES)/State Disposal System (SDS) Permit Program regulates wastewater discharges to land and surface waters. This form applies to municipal and industrial NPDES/SDS permitted facilities that are requesting a name change, transfer of ownership, or permit termination.

Complete the form by typing or printing in black ink. Attach additional sheets as necessary. For more information, please contact the Minnesota Pollution Control Agency (MPCA) at: In Metro Area: 651-296-6300 or Outside Metro Area: 800-657-3864.

MPCA use only
Permit Number
Date Received (MM/DD/YYYY)

Permittee Information

Permittee name: City of Eagan Permit number: MN 0069752
Mailing address: 3830 Pilot Knob Rd
City: Eagan State: MN Zip: 55122
Telephone: 651-675-5300 Fax: 651-675-5360 E-mail: emacbeth@cityofeagan.com
Authorized agent: Eric Macbeth Title: Water Resources Manager

Facility Information

Facility name: Fish Lake Alum Treatment System
Street address: 3643 Widgeon Way
City/Township: Eagan State: MN Zip: 55123
County: Dakota

☐ **Name Change** ☐ **Permit Transfer** ☒ **Permit Termination**

(Check which of the above this application is for and proceed to the applicable section below.)

Name Change

Complete this section only if the Permittee name or Facility name is changing. If there is a change in ownership, complete "Permit Transfer Section".

Permittee name:
Facility name:
Permittee mailing address (if different from above):
City: State: Zip:
Telephone: Fax: E-mail:
Authorized agent: Title:

Permit Transfer

Facility has been sold to or is being leased by a new: ☐ Owner ☐ Operator ☐ Public Entity

Permittee

Permittee name:
Facility name:
Permittee mailing address:
City: State: Zip:
Telephone: Fax: E-mail:
Authorized agent: Title:

Main Contact (Operator/Plant Manager)

Name: Title:
Mailing address:
City: State: Zip:
Telephone: Fax: E-mail:
24-Hour emergency contact backup name: Telephone:

Discharge Monitoring Report Contact

Name: _____ Title: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ E-mail: _____

Billing Contact

Name: _____ Title: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ E-mail: _____

Engineer or Consultant

Name: _____ Title: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ E-mail: _____

Permit Termination

☐ Discharge termination ☐ Facility closed

☐ Discharge routed to sanitary sewer ☒ Other Change in coverage

Briefly describe reason for termination request: Include with City's coverage through NPDES/SDS General MS4 Permit MNR040000, per Part III, Sec. F. Alum or Ferric Chloride Phosphorus Treatment Systems

Signatures

Federal regulations (Section 309(c)(2) of the Clean Water Act and State regulations (Minn. R. 7001.0070) require the authorized signer to be one of the following:

A. For corporation, a principal executive officer of at least the level of vice president
B. For a partnership or sole proprietorship, a general partner or the proprietor, respectively
C. For a municipality, state, federal, or other public facility, either a principal executive officer or ranking executive official
D. If the operator of the facility is different than the owner, both the operator and the owner according to items A to C.

"I understand that the submittal of this Request for termination does not release me from liability for any violations of this permit or the Clean Water Act".

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person, or persons, who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment".

Printed name: Mike Maguire Title: Mayor

Current or previous owner

Authorized signature: Mike Maguire Date: 12-17-2013

Attest: Christina M Seger, Clerk 12-17-2013

Permit Transfer

Printed name: _____ Title: _____

New owner

Authorized signature: _____ Date: _____

Applications that are submitted without an authorized signature will be returned. Please make a copy for your records. Send the completed form to:

Water Quality Document Coordinator
Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, MN 55155-4194

Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, MN 55155-4194

Alum or Ferric Chloride Phosphorus Treatment System Form

Attachment to 2013 MS4 SWPPP
Application for Reauthorization for the NPDES/SDS
Small MS4 General Permit MNR040000
Stormwater Pollution Prevention Program (SWPPP) Document

Doc Type: Permit Application

Instructions: Only complete this form if your Municipal Separate Storm Sewer System (MS4) uses an alum or ferric chloride phosphorus treatment system for stormwater. Refer to Part III.F. of National Pollutant Discharge Elimination System (NPDES)/State Disposal System (SDS) Small MS4 General Permit MNR040000 with an effective date of August 1, 2013, for alum or ferric chloride phosphorus treatment system requirements. In-lake phosphorus treatment activities are not authorized under this application attachment to the 2013 MS4 SWPPP Application for Reauthorization (SWPPP Document).

Submittal: This form must be submitted electronically via e-mail to the Minnesota Pollution Control Agency (MPCA) at ms4permitprogram.pca@state.mn.us from the person that is duly authorized to certify this form. Submit this form along with the 2013 MS4 SWPPP Application for Reauthorization (SWPPP Document). Title your form appropriately, such as: *MS4NameHere_TreatmentSystem*.doc.

Questions: Contact Claudia Hochstein at 651-757-2881 or claudia.hochstein@state.mn.us, Dan Miller at 651-757-2246 or daniel.miller@state.mn.us, or call toll-free at 800-657-3864.

General Information

1. Provide the geographic coordinates of the alum or ferric chloride phosphorus treatment system, in decimal degrees. *(Approximate centroid of treatment system within five-foot accuracy):*
   Latitude: 44.822526 Longitude: 93.153955
2. Provide the name or the position title of the individual(s) who is responsible for the operation of the treatment system*:*
   Eric Macbeth, Water Resources Manager
3. If the system is constructed at the time the 2013 MS4 SWPPP Application for Reauthorization (SWPPP Document) is submitted to the MPCA, provide the following information:
   a. Dates of operation: (2013) May 13 - August 30
   b. Chemical(s) used for treatment: alum
   c. Gallons of water treated: (2013) 92.5M
   d. Gallons of alum or ferric chloride treatment used: (2013) 7,145
   e. Calculated pounds of phosphorus removed: (2013) 57.8
   f. Any performance issue(s) and the corrective action(s), including the date(s) when corrective action(s) was taken:

Alum or Ferric Chloride Phosphorus Treatment System Permit Requirements

Answer **yes** or **no** below to indicate if your alum or ferric chloride phosphorus treatment system meets the following requirements in the Permit (Part III.F.1.):

4. Minimum requirements of an Alum or Ferric Chloride Phosphorus Treatment System:
   a. Limitations
      1) Is your treatment system ***only used*** for the treatment of phosphorus in stormwater (non-stormwater discharges shall not be treated by this system)? ☒ Yes ☐ No

         *If no, contact MPCA MS4 Permit Program staff for appropriate next steps.

      2) Is your treatment system contained within the conveyances and structural stormwater Best Management Practices (BMPs) of a small MS4 (the utilized conveyances and structural stormwater BMPs shall not include any receiving waters)? ☒ Yes ☐ No

*If no, contact MPCA MS4 Permit Program staff for appropriate next steps.

3) Does your treatment system utilize chemicals other than alum or ferric chloride? ☐ Yes ☒ No

*If yes, you must receive written approval from the MPCA. Contact MPCA MS4 Permit Program staff for appropriate next steps.

4) Does your treatment system include in-lake phosphorus treatment activities? ☐ Yes ☒ No

*If yes, in-lake phosphorus treatment is not authorized under this permit. Contact MPCA MS4 Permit Program staff for appropriate next steps.

b. Treatment system design

1) Is your treatment system constructed in a manner that diverts the stormwater flow away from the main conveyance system for treatment? ☒ Yes ☐ No

2) Is a High Flow Bypass part of the inlet design for your treatment system? ☒ Yes ☐ No

3) Does your treatment system include a flocculent storage/settling area incorporated into the design, and adequate maintenance access provided (minimum of eight-feet wide) for the removal of accumulated sediment? ☒ Yes ☐ No

If you answered **no** to any of the above permit requirements in 4.b.1) – 3) (Treatment System Design), describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met.

Answer **yes** or **no** below to indicate if your alum or ferric chloride phosphorus treatment system meets the following requirements in the Permit:

c. Monitoring

1) During operation, does your treatment system have a designated responsible person performing visual monitoring of the treatment system for proper performance at least once every seven (7) days, and within 24 hours after a rainfall event greater than 2.5 inches in 24 hours? ☒ Yes ☐ No

2) Following visual monitoring which occurs within 24 hours after a rainfall event, do you conduct the next visual monitoring of your system seven (7) days after that rainfall event? ☒ Yes ☐ No

3) Does your treatment system utilize three benchmark monitoring stations? Table B-1(Monitoring Parameters During Operation) in the Permit shall be used for the parameters, units of measure, and frequency of measurement for each station. ☒ Yes ☐ No

4) Do you collect grab samples or flow-weighted 24-hour composite samples at your treatment system? ☒ Yes ☐ No

5) Are your treatment system samples, excluding pH samples, analyzed by a certified laboratory by the Minnesota Department of Health and or the MPCA? ☒ Yes ☐ No

(a) Do your sample preservation and test procedures for the analysis of pollutants conform to 40 CFR Part 136 and Minn. R. 7041.3200? ☒ Yes ☐ No

(b) Are your detection limits for dissolved phosphorus, dissolved aluminum, and dissolved iron at a minimum of 6 micrograms per liter (µg/L), 10 µg/L, and 20 µg/L, respectively? ☐ Yes ☒ No

(c) Do you measure pH within 15 minutes of sample collection using properly calibrated and maintained equipment? ☒ Yes ☐ No

6) In the following situations, will you perform corrective actions and immediately notify the Minnesota Department of Public Safety Duty Officer, if:

(a) The pH of the discharged water is not within the range of 6.0 and 9.0? ☒ Yes ☐ No

(b) There are any indications of toxicity or measurements exceeding water quality standards? ☒ Yes ☐ No

(c) There is a spill, as defined in Minn. Stat. § 115.01, subd. 13, of alum or ferric chloride. ☒ Yes ☐ No

If you answered **no** to any of the above permit requirements in 4.c.1) – 6), describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met.

We will revise system sample analyses to meet specific requirements for item 5 above within 12 months of the date permit coverage is extended.

Answer **yes** or **no** to indicate whether you have a record of the following design parameters on-site:

5. On-Site recordkeeping

a. Do you have site-specific jar testing conducted using typical and representative water samples in accordance with ASTM D2035-08 (2003) at your treatment system location? ☐ Yes ☒ No

b. Do you have baseline concentrations of the following parameters in the influent and receiving waters at your treatment system location?

1) Aluminum or iron. ☐ Yes ☒ No

2) Phosphorus. ☐ Yes ☒ No

c. Do you have the following system parameters and how each was determined on-site at your treatment system?

1) Flocculent settling velocity. ☐ Yes ☒ No

2) Minimum required retention time. ☐ Yes ☒ No

3) Rate of diversion of stormwater into the system. ☐ Yes ☒ No

4) The flow rate from the discharge of the outlet structure. ☐ Yes ☒ No

5) Range of expected dosing rates. ☐ Yes ☒ No

d. Treatment System Management. Site-specific procedures shall be developed and a copy kept on-site.

1) Do you have a copy of procedures on-site for the installation, operation, and maintenance of all pumps, generators, control systems, and other equipment? ☐ Yes ☒ No

2) Do you have a copy of procedures on-site for determining when the solids must be removed from the system and how the solids will be handled and disposed of? ☐ Yes ☒ No

3) Do you have a copy of procedures on-site for cleaning up and/or containing a spill of each chemical stored on site? ☐ Yes ☒ No

If you answered **no** to any of the above permit requirements in 5.a. – d., describe the tasks and corresponding schedules that will be taken to assure that, within 12 months of the date permit coverage is extended, these permit requirements are met.

We will establish on-site recordkeeping to meet specific requirements for items 2-5 above within 12 months of the date permit coverage is extended.

Add any Additional Comments